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SOURCE Newspapers as indicated.

POLAND HAS POLIO EPIDEMIC

PUBLIC HEALTH PROGRAM TO CONTROL POLIO -- Sluzba Zdrowia, 9 Sep 51

The Mother and Child Department and the Sanitary-Epidemiological Department, both under the Ministry of Health, are closely cooperating to control the Heine-Medina disease. Field centers have now been opened in all wojewodztwos to conduct preventive and sanitary programs in the field. In the field centers are included representatives of the ambulance disposal centers and the wojewodztwo mother and child clinics. The wojewodztwo centers received special ambulances to transport the patients. Similar centers are now being opened in the powiats.

These centers will be responsible for the prompt diagnosis of the Heine-Medina disease, prompt transfer of the patients to a hospital, thorough disinfection of the patient's residence, and enforcement of sanitary regulations in the area.

Simultaneously, a sanitary program will be conducted in all schools and kindergartens. Health officers will inspect schools, especially the water supply, toilets, rubbish disposal, general cleanliness, personal hygiene, and feeding of children.

The central Foradnia Ochrony Macierzynstwa i Zdrowia Dziecka (Consultation Office for the Protection of Motherhood and Child Health) in Warsaw organized a meeting for the doctors in the lecture room of the Dermatological Clinic, 22a Koszykowa Street, to give them information on prevention and treatment of the Heine-Medina disease. This meeting was attended by nearly 200 persons, including a group of doctors trained in Czechoslovakia in methods of rehabilitating the sick by the Kenny system.

At the meeting, Dr B. Mirowski, manager of the Sanitary-Epidemiological Station, discussed the sanitary regulations on the prevention of the Heine-Medina disease.

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HEALTH MINISTER ISSUES POLIO INSTRUCTIONS -- Supplement to Sluzba Zdrowia, 2 Sep 51

The Minister of Health issued an order dated 25 July 1951, No E II 26/1168/51, on the procedure to be followed on epidemic infantile paralysis cases (Heine-Medina disease -- acute inflammation of the anterior horns of the spinal cord).

The order reads as follows:

Because of the increase in the incidence of epidemic infantile paralysis, the Minister of Health hereby orders that:

1. Epidemic infantile paralysis patients, and persons suspected of having this disease, should be quarantined immediately in a hospital or ward for contagious diseases.

The quarantine period in the hospital should be at least 40 days from the day of illness. After contact with the patient, anyone showing signs of fever or disturbance in the alimentary canal, nose, or throat should be treated as an infantile paralysis case.

2. Children who had contact with an epidemic infantile paralysis patient and who have not had this disease also adults employed in institutions for children ranging up to 7 years of age, should be quarantined for 20 days, provided there are no symptoms of disturbance in the alimentary canal, or inflammation of the nose or throat.

Persons residing with the patient may not engage in the processing or distribution of food for a period of 14 days. A person must present a certificate from a public-health doctor before returning to work or school.

Persons under quarantine should gargle with a solution of potassium permanganate as often as possible; bed linens and handkerchiefs must be boiled before laundering.

3. Public-health doctors, medical aides, and nurses must report epidemic infantile paralysis cases and suspected illness immediately, under penalty of the law of 21 February 1935.

4. Managers of health departments of powiat and municipal People's Council Presidiums, on weekly reports of incidence and mortality of contagious diseases, should give full information on each epidemic infantile paralysis case on the back of the reports, which are sent to the Ministry of Health and to the wojewodztwo People's Council Presidiums.

5. In epidemic infantile paralysis case, suspected case, disinfectants should be used in the course of the disease, and, after recovery, as prescribed for contagious intestinal diseases (Circular No 42/48, 11 May 1948, on disinfection, disinfestation, and deratization. See Official Journal of the Ministry of Health, No 11, Item 92).

6. In case of an infantile paralysis epidemic, the Presidium of the wojewodztwo People's Council may, in conjunction with the Ministry of Health, order the closing of motion-picture houses, theaters, swimming pools, etc.

7. During an epidemic, strenuous activity, especially by young children, should be avoided. Surgery, especially of the nose and throat, should be postponed unless it is required to save the patient's life.

8. Localities where infantile paralysis cases have occurred should suspend all vaccinations of children up to the age of 14 for a period of 20 days from the first of the quarantine period of the last case.

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9. When a child attending school, kindergarten or nursery becomes ill, the class, kindergarten, or nursery must be closed for a period of 20 days, and the area disinfected as prescribed by the order of 15 February 1951 by the Ministries of Health, Education, and Culture and Arts on the control of contagious diseases among children up to 14 years of age (Official Journal of the Minister of Health, No 5, Item 84).

10. Every means should be used to destroy pests of all types, especially flies, in the home of the infantile paralysis patient and in surrounding farm buildings.

Food should be covered, toilets kept clean, rubbish and dunghills maintained in order, areas chlorinated, etc.

11. No summer camps should be organized in localities where numerous cases of epidemic infantile paralysis have occurred.

12. When epidemic infantile paralysis is confirmed, the following measures should be taken immediately: (a) swimming pools should be cleaned with chlorinated water; (b) beaches designated for river bathing must be checked for distance from sewage disposal and sanitary conditions of toilets. Toilets should be chlorinated daily. -- J. Sztachelski, Minister of Health

GIVES PROCEDURES FOR TREATING HEINE-MEDINA DISEASE -- Supplement to Sluzba Zdrowia, 2 Sep 51

A directive published as a supplement to the Sluzba Zdrowia, No 35, Vol 107, 2 September 1951, issued by the Mother and Child Department, Ministry of Health, gives detailed instructions to physicians on the treatment of children afflicted with Heine-Medina disease in the acute stage (6-week quarantine).

The instructions distinguish between four basic types of Heine-Medina disease.

1. Preparalytic Type

Symptoms

Difficulty in swallowing
Nasal speech
Running nose
Accumulation of mucus in the mouth
Signs of paralysis of vocal cords
Heavy, irregular, and shallow breathing
Livid hue

Treatment

Drainage of mucus from the throat and larynx. Hot poultices on the neck and upper thorax. Reclining position on stomach, with head lower than the rest of the body. Possible tracheotomy. Rectal or intravenous feeding. No belladonna or milk should be administered. A rubber tube may be used to feed the patient

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2. Inspiratory Type (caused by the contraction
of the intercostal and pectoral muscles,

<u>Symptoms</u>	<u>Treatment</u>
Contraction within the intercostal area Pectoral muscles begin to contract Shoulders protrude Thorax movements limited Respiration shallow and accelerated Auxiliary respiratory muscles used Livid hue, restlessness, anxiety	Oxygen and coramine Concentrated hot poultices on thorax

3. Expiratory Type (caused by contraction of the thorax)

<u>Symptoms</u>	<u>Treatment</u>
Depression near sixth rib Expansion of lower part of thorax, and distension of abdomen Difficulty in expiration, with use of abdominal muscles and manual pressure on lower part of thorax Inability to cough Eyes staring	Concentrated hot poultices on lower part of thorax and upper part of abdomen; applications on the back should be changed every hour Coramine and oxygen Iron lung used; in case there is no iron lung, artificial respiration should be used

4. Weakening or Paralysis of Respiratory Muscles

<u>Symptoms</u>	<u>Treatment</u>
Shallow breathing Gasping for air Great difficulty in deep breathing Skin very pale around the mouth, later turning to livid; restlessness, anxiety	Concentrated hot poultices on thorax Oxygen Iron lung used if the patient has been weakened from inspiring If an iron lung is used, it should be opened for one minute several times a day to accustom the patient to breathe without the iron lung

EXHORT PUBLIC TO OBSERVE HYGIENE RULES -- Express Wieczorny, 28 Sep 51

Recent daily reports show a decrease in the number of epidemic infantile
paralysis cases.

Not only the Ministry of Health, doctors, and auxiliary medical personnel,
but also the general public must help control this disease by observing hygienic
principles and regulations.

It is the duty of the public to improve general sanitary conditions; main-
tain children, living quarters, kitchen utensils, and food as clean as possible;
and follow suggestions by radio, press, and pamphlets.

The Polish Ministry of Health has appointed a scientific commission to
study virus diseases, particularly epidemic infantile paralysis, caused by a
minute virus.

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SOVIET SPECIALISTS VISIT WARSAW -- Sluzba Zdrowia, 16 Sep 51

On 11 September 1951, a delegation of Soviet doctors, headed by Prof Konstantin Aleksandrovich Vinokurov, arrived in Warsaw from Copenhagen where they attended an international conference devoted to the problems of the Heine-Medina Disease. Other members of the delegation were Prof Yelizaveta Nikolayevna Levkovich, Prof Vladimir Nikolayevich Blokhin, and Aleksey Alekseyevich Gavrilov. Representatives of Polish medicine also took part in the Copenhagen conference.

While in Warsaw, the Soviet scientists visited some of Warsaw's pediatric centers, including the clinic located on Litewska Street, and showed great interest in the Polish methods of treatment. The Soviet scientists also participated in conferences organized by the Polish Ministry of Health.

SOVIET SPECIALISTS LECTURE ON POLIO -- Sluzba Zdrowia, 23 Sep 51

Soviet scientists who took part in the International Congress of Physicians in Copenhagen, who are now in Warsaw, were invited by the Ministry of Health to lecture on the Heine-Medina disease, which, for the first time, has assumed alarming proportions in Poland.

On 13 September 1951, the auditorium of Warsaw's School of Anatomy was filled to capacity with doctors and professors. Jerzy Sztachelski, Minister of Health, and Dr Boguslaw Kozusznik, vice-minister, were among those present.

After Prof-Dr Ludwik Paszkiewicz, chairman of the Scientific Council of the Ministry of Health, welcomed the Soviet scientists, Prof K. Vinokurov gave a report on the status of experimental work on monkeys in research of the Heine-Medina disease in the scientific institutes of the USSR. He also presented the methods used by the Soviet health service to combat and prevent this disease. Prof Levkovich reported on the USSR's experimental research on the poliomyelitis virus. Prof V. Blokhin spoke on the orthopedic treatment of poliomyelitis cases, which stands at a very high level in the USSR.

The Heine-Medina disease is not as prevalent in the USSR as in the USA and West European countries.

Lately, Soviet scientists have been using Dibazol, a Soviet preparation, with favorable results. Beneficial results have also been obtained from hormone treatments, particularly extracts of the adrenal cortex (Schwartzman method).

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